

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 020154-001210US
<b>FY 2006</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		
Application Number	10/692,474 Filed October 22, 2003	
For IMPLANTABLE MEDICAL DEVICES USING ZINC		
Art Unit 3738	Examiner Thomas C. Barrett	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ <u>60</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ <u>      </u>
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ <u>      </u>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ <u>      </u>
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ <u>      </u>

Applicant claims small entity status. See 37 CFR 1.27.  
 A check in the amount of the fee is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director has already been authorized to charge fees in this application to a Deposit Account.  
 The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet.  
**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the

<input type="checkbox"/> applicant/inventor.
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>52,301</u>
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____

  
 Signature \_\_\_\_\_ Date March 16, 2007

Alexander R. Trimble, Reg. No. 52,301  
 Typed or printed name \_\_\_\_\_ Telephone Number 415.576.0200

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of \_\_\_\_\_ forms are submitted.